



Biological weapons by stealth – from WHO THE HELL

Sun 7:56 am +01:00, 14 Apr 2024

posted by Tapestry

Slides from my webinar tonight on how the WHO intends to proliferate biological weapons

With just a few words describing what I was getting at. Thrilled that so many asked for them.

MERYL NASS
APR 14



READ IN APP ↗

I have given many talks about what the WHO is doing with its pandemic treaty and IHR amendments. And I have found that when I get into this minutiae, people are overwhelmed with too much detail and don't remember much. Plus, the WHO made the details as complicated as they possibly could, to keep everyone confused.

So I am trying a new strategy with my talks. I am putting up a few summary slides about important details which you can review as you like—but I am not going to talk about them, and instead try to focus on one area. Which today is the subject of biological warfare.



15 Years of WHO Failures

1. 2009 pandemic declaration to trigger vaccine contracts
2. 2014 failure to assist ebola outbreak for many months in west africa
3. 2018-19 failure to assist ebola outbreak for many months in Congo
4. Sexual abuse of clients by WHO staff—many victims paid off \$250 by WHO; 200 investigations of WHO staff last year alone
5. Supervisors of the abusers were quietly sent back to work without sanctions
6. 2020 Solidarity trial overdosed nearly 1,000 subjects with hydroxychloroquine to sink the drug, no informed consent record kept for many subjects
7. 2020 onward—poor COVID advice, monkeypox declaration despite expert advice
8. Funding by private entities is now 85% of WHO budget

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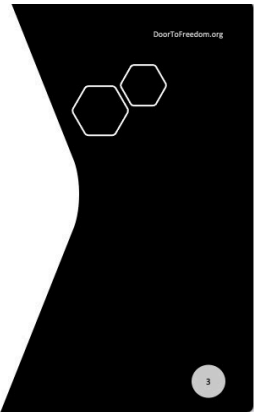
See the article I wrote earlier today about the litany of WHO failures and why the WHO should never be trusted to get anything right, especially your health and access to information.

Below I list 8 really bad things the WHO wants to gain the power to do (the long elevator ride spiel).

What do the IHR Amendments and Pandemic Treaty do?

1. Future PHEICs will be declared by the WHO Director-General who can apply measures like those used for COVID including lockdowns and vaccine mandates—usurping state authorities
2. WHO can order what Drugs are to be used and those to be restricted—usurping state and federal authorities
3. PREP Act must be globalized: laws and structures put into place to allow the use of unlicensed vaccines and drugs and to remove any liability from these products.—14th amendment violation of due process
4. WHO will tell nations what misinformation and disinformation they must censor.—1st amendment violation
5. Medical records and other personal data are to be shared with the WHO—4th amendment violation
6. "One Health" expands the range of authority for the WHO D-G, wrapping plants, animals and ecosystems into the Health basket to be managed by the WHO
7. The treaty gives the WHO a blank check to write the rules in future and determine the price nations will need to pay, in future.
8. Potential pandemic pathogens will be collected, shared and managed by the WHO.—Biological Weapons Convention violation

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The 2 WHO documents to be voted on in May 2024

International Health Regulation (IHR) Amendments

- Needs over a **50% vote** to pass
- **Every member** of the WHO and IHR (196 countries) **must obey** it if passed, unless the nation issues a formal revocation or reservation
- Goes into effect 12 months from a vote or a 'consensus' (if WHO avoids a vote)
- **Nations have 10 months to revoke or reserve after it passes.** No option exists to get out of the new IHR after that.
- This is an **OPT-OUT** process
- In force during a declared pandemic or potential pandemic

Pandemic Treaty, also called Accord, Agreement, Instrument, etc.

- Needs at least **2/3 vote** to pass
- If passed, nations must then formally sign or ratify to become a party
- Goes into effect for all signatories one month after the 40th signature
- Nations may not ask to withdraw from the treaty until two years after it enters into force, and then it will take an additional 12 months to get out
- This is an **OPT-IN** process, with an unusually short time-frame before entering into force
- The treaty will always be in force

And above I simply compare the two documents cause people want this information, but nobody can remember it nor does anyone want to.

Below is a different summary slide—of ways the WHO misleads and misdirects, lies and hides things that no one in their right mind would agree to.

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The Global Biosecurity Agenda and the WHO's Pandemic Planning Instruments are Built on Lies and Misdirection

1. No sovereignty is ceded to the WHO? — yet the WHO will give binding orders to nations and require them to pass laws to carry out the orders, a **clear transfer of sovereignty** (IHR Article 1)
2. "Regulatory strengthening" is actually **regulatory weakening** (Treaty Article 14)
3. "Managing liability" is actually **removing liability** for warp speed vaccines (Treaty Article 15)
4. The WHO promises "**universal health coverage**" (insurance policies to be purchased) and hopes we misinterpret it as medical care (Treaty Article 1)
5. The WHO promises unfettered access to information, then **demands nations censor "infodemics" and "misinformation"** (Treaty Articles 9, 18), (IHR Article 44)
6. Pandemics are much more likely to come from the labs the WHO demands every nation construct to study PPPs and from the **sharing of PPPs** (Treaty Article 12 and the Select Agent yearly reports)
7. "**One Health**" is a Trojan horse designed to place everything in the world under the WHO's authority (Treaty Article 6)
8. **Human rights, dignity and freedom of persons have been discarded** (IHR Articles 2 and 3)
9. The **WHO can withhold medications** it deems "disproportionate or excessive" (IHR Article 43)

The CLASSIC WEAPONS OF MASS DESTRUCTION are:

- *Chemical,
- *Biological,
- *Radiologic,
- *Nuclear

- **Biological Warfare is the only one that is easy to hide**
- **If a microbe like anthrax or SARS occurs widely, *but naturally*, we call it an epidemic**
- **If the same microbe is deliberately released, we call it biological warfare**
- **How do you know which is which?**

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Now the formal talk on biowarfare : yes it is real. It is relatively cheap. It works. And so OF COURSE it will be used. And biowarfare is the only type of WMD for which one can often have plausible deniability. It was NATURAL. You must be a conspiracy theorist. Fallback position 1: It came from a lab but it was a naturally occurring virus kept in the lab. (Fauci tried that waffle first). Fallback position 2: But it was an ACCIDENT.

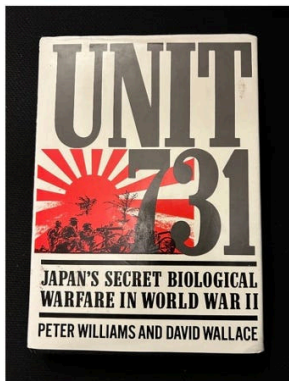
1760s: the British gave smallpox-infested blankets to the Indians in the vicinity of Fort Pitt, (now Pittsburgh, Pennsylvania) to kill them



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Japan had a flourishing program to develop and use biological warfare agents before and during World War 2



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Remarkably this article or versions of it were printed in the WaPo and other papers. The story revealed that in this operation the US was transgressing the biological weapons convention treaty it had initiated, which was being negotiated but which had not yet come into force.

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Tapestry on Henry Curteis Teds candidate for West Mercia outlines his plans to bring back visible policing to the region.

ATOM FEED

In 1971, the CIA introduced African Swine Fever to Cuba.

500,000 pigs had to be culled.

The story was reported in 1977 by the WaPo, S.F. Chronicle, and N.Y. Newsday

DREW FETHERSTON and JOHN CUMMINGS on American germ warfare

Opening the phials of the CIA

WITH AT LEAST the tacit backing of US Central Intelligence Agency officials, operatives linked to anti-Castro terrorism introduced African swine fever virus into Cuba in 1971. Six weeks later an outbreak of the disease forced the slaughter of 500,000 pigs to prevent a nationwide animal epidemic.

A United States intelligence operative claims he was given the virus in a sealed container at an American Army base in Panama. He said he had CIA training manuals with instructions to turn it over to the anti-Castro group.

The 1971 outbreak first and only time the disease has hit the Western Hemisphere, was labelled the "most alarming event" of 1971 by the United Nations Food and Agricultural Organization. African swine fever is a highly contagious and usually lethal viral disease that infects only pigs and, unlike swine flu, cannot be transmitted to humans. There were no human deaths involved in the outbreak, but all production of pork, a Cuban staple, came

to a halt, apparently for several months.

A CIA spokesman, Dennis Bovey, in response to a request for comment, said: "We don't comment on information from unnamed and, at best, obscure sources."

Why the virus turned up in Cuba has been a mystery to animal investigators since the outbreak. Informed speculation assumed the virus entered Cuba either in garbage from a commercial airliner or in smuggled livestock.

However, on the basis of four months with US intelligence sources, Gates ruled out both possibilities—the outbreak—which occurred two years after then President Richard Nixon had banned the use of offensive chemical and biological warfare—we were able to piece together the account of events leading up to the outbreak.

Port Ochoa, where the operative first in was given the virus, was a Cuban Army military training centre for cover personnel and mercenaries as well as an Army base.

After he had passed the virus to the anti-Castro group it was given to a person in the Civil Guard, who took it by boat and turned it over to a fishing trawler off the Panamanian coast. The source said the submarine was not identified to him until months after the outbreak. In Cuba, he would not elaborate further.

Another man involved in the operation, a Cuban exile who asked not to be identified, said he was on the trawler when the virus was put aboard at a prearranged rendezvous point off Bocas del Toro, Panama. He said the trawler carried the virus to Navassa, a deserted, tiny, 150-acre island between Jamaica and Cuba.

From there, the container was taken to Cuba and given to other operatives on the southern coast near the US Navy base at Guantanamo Bay in late March, according to the source on the trawler. The base is 100 miles due north of Navassa.

A sailor assigned by the Cuban for a seaside operation in Mexico City said the first pig virus was found about May 6, but no precise location was given. A man-

Soviet block agricultural technicians then in Cuba said the disease easily could have gone undetected for months.

The source on the trawler, who had been trained by the CIA and had carried out previous missions for the agency, said he saw no CIA officials aboard the boat that delivered the virus to the trawler off Panama, but added: "We were well paid for this and Cuban exile groups don't have that kind of money." He suspected, but never knew for sure, what was in the container. "When I talked about this stuff all they told me was to keep my mouth shut."

Confidential sources with access to some CIA records said the swine fever operation was not mentioned in the list of approved covert operations. But Congress's efforts to probe CIA activities in chemical and biological warfare have been frustrated. The Senate select committee on intelligence said in its final report last year that Army and the CIA had turned into a special agreement to build chemical agents and delivery systems, but that the written records of these activities were destroyed.—Saturday.

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Castro on the Attack Again with Hints of U.S. Biological Warfare

By Christopher Dickey
July 29, 1981

Most Read Politics

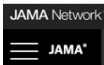
Washington Post. July 29, 1981—"African swine fever, sugar cane rust, blue mold on tobacco have damaged the economy and now dengue fever has killed 113 people and infected more than 270,000 others in the last seven weeks.

Castro did not claim to be certain of the source of these diseases but he noted that "many citizens are deeply convinced that these sicknesses, especially dengue, were produced in this country by Yankee imperialism."

Castro shared the suspicion. He said that the plagues "could have been introduced . . . by the CIA."

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Below are two episodes of biological warfare (actually the first was technically chemical warfare) that I investigated.



July 28, 1993

'Outbreak' of Optic and Peripheral Neuropathy in Cuba?

Norah S. Lincoff, MD; Jeffrey G. Odel, MD; Michio Hirano, MD

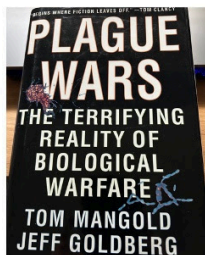
> Author Affiliations

JAMA. 1993;270(4):511-518. doi:10.1001/jama.1993.03510040115049

* During 1992 and 1993 a new syndrome developed in Cuba. All parts of the nervous system were affected, especially vision.

* I investigated the epidemic for the Cuban MOH in 1993 and discovered, at the same time as several others, that it was due to low doses of cyanide coupled with nutritional deficiencies that made it difficult to detoxify the cyanide.

Anthrax was used in 1978-81 during Rhodesia's civil war, to kill cattle and impoverish the black population seeking majority rule.



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PLAGUE WARS

But those anthrax deaths were all man-made. Here, in the hard bush life, some things are not the will of the Almighty.

It was years before anyone found out.

The first to suspect a

Meryl Nass, MD, then with

University of Massachusetts

researched the epidemiology

in Rhodesia/Zimbabwe in

statistics, she realized that

had occurred during the years

Southern Africa, but Rhodesia, with its fine veterinary services and

human health care, had reported only an average of thirteen human

cases a year before 1978. However, in the two years 1979/80, a staggering

10,728 human cases were recorded and 182 humans died of the illness.

Thousands of cattle were infected and had to be slaughtered. The disease

spread over time from area to area, into six of the eight provinces.

Significantly, virtually no commercial, white-owned farms were affected.

Even more puzzling was the way in which the anthrax spores were

transported over very large distances - across areas where no bovine cases

were known to have occurred. If the cattle had not spread the spores,

then who or what had? Dr Nass suspected the worst.

The epidemiology and circumstantial evidence pointed in one direction,

but confirmation had to wait for years. The earliest corroboration

was probably in a secret report sent by a US Defense Intelligence Agency

officer to the Pentagon. 'According to [source deleted], a member of the

Rhodesian Selous Scouts admitted in 1978 that "they" had tried both

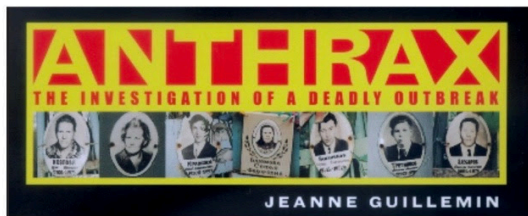
chemical and biological warfare techniques to kill terrorists.' The DIA

Anthrax was used in 1978-81 civil war, to kill cattle and impoverish the black population seeking majority

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The Russians did not respect the prohibition on biowarfare, killing about 60 people in Sverdlovsk (now Yekaterinburg) due to an accidental release of anthrax.

In 1979 an accidental leak occurred at an anthrax factory in Sverdlovsk, USSR, releasing airborne anthrax spores that killed about 60 people



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People worry when they hear about "self-spreading vaccines" today, mentioned by Dr. Inouye, but are not aware they have actually been used for decades.

This NY Times article is dated November 26, 1991

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New Animal Vaccines Spread Like Diseases

In the wild, artificial viruses curb both rabies and rabbits.

By MALCOLM W. BROWNE

SCIENTISTS in North America, Europe and Australia say they believe that a new family of genetically engineered vaccines will soon be perfected as powerful weapons against such epidemic as rabies, as well as animal pests like rats and rabbits. Biologists say that new vaccines under development can not only halt epidemic diseases among wild animals, but will provide a means of controlling pest populations of rabbits in Australia, rats in Indonesia, white-tailed deer in the United States and other rapidly multiplying species that threaten the environment.

In closely related research, major progress has been reported in developing vaccines that would immunize human beings against conception. The World Health Organization has created a special working group to find ways to reach this goal. The scientists in France are already fighting an epidemic of rabies in foxes by air dropping food laced with a genetically engineered rabies vaccine over the countryside. French and Belgian experts conducted two extensive trials of vaccine-created fox bait during the last

year, and results were so encouraging that a third distribution is planned. The United States is lagging behind Europe, despite an epidemic of rabies in raccoons and other animals that is rapidly spreading along the Eastern Seaboard. But last June 7, the first genetically engineered live vaccine ever released into the environment on the United States mainland was mixed with raccoon bait and distributed over a tract of wilderness in northeastern Pennsylvania. The object was to test the safety (but not the efficacy) of a vaccine genetically engineered to immunize raccoons against rabies.

The Pennsylvania test and a previous safety test on the raccoon population in Pennsylvania, Va., were successful, as a larger planned trial will test the vaccine for efficacy — a step required by Federal and state regulatory agencies before the vaccine can be distributed over wide areas.

In the case of rabies, the new vaccine is made from a genetically altered strain of a common virus called vaccinia — a close but harmless relative of the smallpox virus. Biologists have learned to insert harmless viral components of the rabies virus, called antigens, into vaccinia virus, so that when an animal eats bait laced with the altered vaccinia virus, its immune system begins producing antibodies capable of preventing the animal against the rabies virus itself. Dr. Warren B. Chenoweth, the assistant director of the Wistar Institute in

Continued on Page C-6

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Why did China suddenly have many outbreaks of African Swine Fever, confluent with COVID, causing a drop in GDP of nearly 1%?

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Article | Published: 27 September 2021

African swine fever outbreaks in China led to gross domestic product and economic losses

Shibing You , Tingyi Liu, Miao Zhang, Xue Zhao, Yizhe Dong , Bi Wu, Yanzhen Wang, Juan Li, Xinjie Wei & Baofeng Shi

Nature Food 2, 802–808 (2021) | Cite this article

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The \$100-billion toll of a pig epidemic in China

Nature Research Highlight 01 Oct 2021

Sections Figures References

[No Title]

Could it be biological warfare?

Opinion | A flu virus risk worth taking

By Anthony S. Fauci, Gary J. Nabel and Francis S. Collins

December 30, 2011 at 9:39 a.m. EST

- "A number of important scientific and public health questions regarding this [bird flu] virus remain unanswered, including the likelihood of such mutations arising and the mechanisms by which they may occur..."
- Two recent studies co-funded by the National Institutes of Health have shed light on how this potentially grave human health threat could become a reality. **This laboratory virus does not exist in nature.** There is, however, considerable concern that such a virus could evolve naturally. We cannot predict whether it or something similar will arise naturally, nor when or where it might appear.
- Given these uncertainties, important information and insights can come from generating a potentially dangerous virus in the laboratory...
- The question is whether benefits of such research outweigh risks."

https://www.washingtonpost.com/opinions/a-flu-virus-risk-worth-taking/2011/12/30/gIQA9sNRP_story.html

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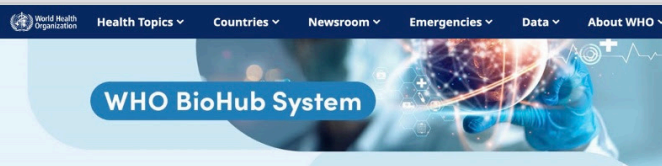
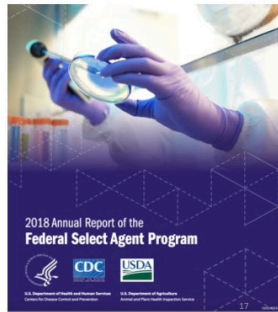
Fauci and Collins will go down in infamy over their assertion that a "flu" virus Gain of Function research project (or actually many such projects) entailed a risk worth taking. And those risks are considerable, because you can never avoid accidents. People stick themselves with needles. Little animals squirm and bite while you are injecting them. Glass breaks and you cut yourself. Solvents dissolve your plastic gloves. Stuff happens.

Prevention is Impossible, and 'Preparedness' is very risky!

- CDC and USDA run a Select Agent program for ~60 US Potential Pandemic Pathogens that could affect humans, plants, livestock
- There are **200 lab accidents per year** reported to CDC re: select agents studied in the US
- In 2018 alone, 173 (of 201 reported) releases led to **"895 individuals [receiving] occupational health services, including medical assessments and, if needed, diagnostic testing and prophylaxis."**

https://web.archive.org/web/20200410035210/https://www.selectagents.gov/resources/FSAP_Annual_Report_2018_508.pdf

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What is the WHO BioHub System?

<https://www.who.int/initiatives/who-biohub#events>

The COVID-19 pandemic, along with other recent outbreaks and epidemics, has underscored the importance of rapid and broad sharing of pathogens for effective surveillance and the timely development of medical response products such as diagnostics, therapeutics or vaccines. Currently a great deal of pathogen sharing is done bilaterally and on an *ad hoc* basis, which can be inefficient and risks both leaving some countries out and not covering important, emerging pathogens.

The world needs a system to rapidly, safely and efficiently share biological materials with epidemic or pandemic potential, and expertise to conduct thorough risk assessments that can be rapidly shared with all countries, and in time, to develop medical countermeasures that can be equitably shared with all countries in need.

The WHO BioHub System will offer a reliable, safe, and transparent mechanism for WHO Member States to voluntarily share novel biological materials, without replacing or competing with existing systems. Sharing of biological materials with epidemic or pandemic potential will be done through one (or more) of the laboratories designated as a WHO BioHub.

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Above is a screenshot from the WHO website. Yes, WHO is very open about wanting to be the curator of all the "potential pandemic pathogens" aka biological warfare agents they can get their hands on. In multiple labs belonging to the biohub system. So these agents can be shared globally. Which will predictably result in one pandemic after another. Keep reading to find out why.

Now I share many screenshots straight from different versions of the WHO's drafts of the Pandemic Treaty, currently titled Pandemic Agreement.

It is hard to believe but the WHO says it plainly:

What are the objectives of the WHO BioHub System?

The objectives of the WHO BioHub System are to:

- Promote rapid and timely sharing of biological materials with epidemic or pandemic potential;
- Facilitate rapid access to such pathogens and their information by relevant, interested, and qualified entities for the development of effective and safe public health products including diagnostics, vaccines and therapeutics; and
- Ensure fair and equitable access to such products by all countries, based on public health needs.

<https://www.who.int/initiatives/who-biohub#events>

From the March 7, 2024, draft of the treaty; the treaty is in effect 24/7, not just during pandemics

Article 12. Access and benefit sharing

1. The Parties hereby establish a multilateral system for access and benefit sharing for pathogens with pandemic potential: the WHO Pathogen Access and Benefit-Sharing System (PABS System).

2. The PABS System aims to ensure rapid, systematic and timely access to biological materials of pathogens with pandemic potential and the genetic sequence data (GSD) for such pathogens, which contributes to strengthened global surveillance and risk assessment, and facilitates research, innovation and development of health products; and on an equal footing, equitable, fair and rapid sharing of monetary and non-monetary benefits, including timely, effective and predictable access to relevant diagnostics, therapeutics or vaccines, based on public health risks, needs and demand, contributing to the rapid and timely control of public health emergencies of international concern and pandemics.

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In treaty language, "shall" means MUST. Sharing is good. And loosening "unnecessary administrative hurdles for research" is even better, apparently, when you are doing GOF research. GOF research means creating biowarfare agents.

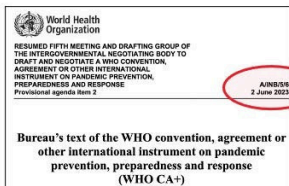
March 7, 2024 Treaty Draft: Article 12, #3. (a, b)

3. When a Party has access to a pathogen with pandemic potential, it shall, using applicable biosafety, biosecurity and data protection standards:

- (a) share with WHO any pathogen sequence information as soon as it is available to the Party;
- (b) as soon as biological materials are available to the Party, provide the materials to one or more laboratories and/or biorepositories participating in WHO-coordinated laboratory networks (CLNs), which meet the legally binding terms of reference, as referenced below, with an electronic label of "PABS biological material" which will follow through to the end products and/or publications, and shall notify users of biological materials of the benefit-sharing provisions under the PABS System, recognizing that each Party may also share such biological materials to entities outside the CLNs. All users of biological materials shall have legal obligations under PABS regarding benefit sharing; and

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https://apps.who.int/eb/inb/pdf_files/inb5/A_INB5_6-en.pdf, p.14

Article 9. Research and development

5. Each Party shall implement and apply relevant international standards for the biorisk management of laboratories and research facilities that carry out research to better understand the pathogenicity and transmissibility of pathogens with pandemic potential, and to prevent the unintended consequences of such research, while minimizing unnecessary administrative hurdles for research. !!

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The WHO has built a system for sharing "Open-Source"

Biological Warfare agents (10/30/23 Treaty draft)
<https://doortofreedom.org/2023/07/14/pandemic-treaty-compendum/>

Article 12. Access and benefit sharing

1. The Parties hereby establish a multilateral system for access and benefit sharing, on an equal footing, the WHO Pathogen Access and Benefit-Sharing System (WHO PABS System), to ensure rapid and timely risk assessment and facilitate rapid and timely development of, and equitable access to, pandemic-related products for pandemic prevention, preparedness and response.

4. The WHO PABS System shall have the following components:

(a) WHO PABS Materials sharing:

(i) Each Party, through its relevant public health authorities and authorized laboratories, shall, in a rapid, systematic and timely manner: (1) provide WHO PABS Material to a laboratory recognized or designated as part of an established WHO coordinated laboratory network; and (2) upload the genetic sequence of such WHO PABS Material to one or more publicly accessible database(s) of its choice, provided that the database has put in place an appropriate arrangement in respect of WHO PABS Materials.

(ii) The WHO PABS System shall be consistent with international legal frameworks, notably those for the collection of patient specimens, material and data, and will promote findable, accessible, interoperable and reusable data available to all Parties.

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Instead of terminating Gain-of-Function research, the WHO experts will supervise it! (2/14/24 treaty draft)

[Article 24. Scientific Advisory Committee

1. The Parties hereby establish a Scientific Advisory Committee as a subsidiary body of the Governing Body, to assess the science related to pandemic prevention, preparedness, response and recovery.

2. The Scientific Advisory Committee shall consist of independent experts from various disciplines related to pandemic prevention, preparedness, response and recovery. The experts shall be nominated by the Parties, and appointed by the Director General.

3. The Scientific Advisory Committee shall perform the following functions:

- (i) supervise research involving pandemic potential pathogens including genetic engineering and "gain of function" research with a view to avoiding biosafety and biosecurity concerns including accidental laboratory leakages of disease-causing agents and in this regard, develop guidelines and submit to the Governing Body; and

https://healthpolicy-watch.news/wp-content/uploads/2024/02/INB8_Chapter-III.pdf

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If you share these organisms widely, you will not only have accidents, but you won't be able to tell whether any were deliberately released nor who did it—because they will have been "shared globally."

It also means nations and subnational groups won't need to have their own labs to develop biowarfare agents—they will simply be given the weapons

And hackers can download the genetic sequences off the internet and construct their own lethal viruses

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I have just shown you the proof that the WHO PANDEMIC TREATY is actually a method for creating, sharing and proliferating biological warfare agents, whether or not there is a pandemic.

WHY WOULD YOU BROADLY DISTRIBUTE A WEAPON OF MASS DESTRUCTION?

... to generate more pandemics?

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According to international law: The 1972 **Biological Weapons Convention**, The 2004 **Security Council Resolution 1540**, and 'Customary international law,' what the WHO is trying to do is illegal!

• The **WHO** is trying to sneak this past us, expecting our **CONTROLLED** governments will go along with it

• We the people must be the ones who say **NO** and we have to say it **LOUDLY! NOW!**

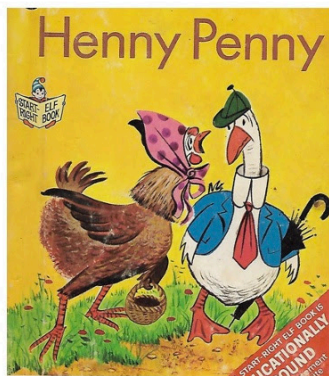
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An acorn hit Henny Penny, and she told everyone "The SKY is FALLING DOWN!"

The H5N1 "Bird Flu" is being used to frighten everyone—it is crucial not to be fooled.

The current strains of bird flu and not dangerous for humans, but chickens are being killed and perfectly good milk from "affected" cows is being thrown away to push the pandemic agenda.



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While I have told you about some very scary things that the WHO is seeking, there is a very NOT-scary thing being used to gin up fear and gain support for the WHO's pandemic treaty and IHR amendments. And that thing is bird flu. It is no longer a problem for humans. No Americans have ever died from bird flu. Ever. Only 2 had very mild illnesses—if in fact they were due to bird flu. And food from bird, cows etc. will be perfectly fine (if they really have the virus, a big IF) if it is cooked or pasturized before being consumed. A lot of chickens have been killed to perpetuate this scam.

What can we do? Plenty!

- Educate your leaders and lawmakers about this
- Point out that what the WHO is proposing is **illegal**
- **Note that what is being sold to us as a method for preventing pandemics is really a method for creating more pandemics**
- Assert in your towns, counties and states that your local governments will not comply with the WHO plans
- Encourage your government to reject the IHR amendments (you have 10 months to do so) and refuse to ratify the Pandemic Treaty
- **Ban Gain-of-Function research!**
- **Encourage everyone you know to say they will not comply!**



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Blog editor - editor[at]tapnewswire.com